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PATENT

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Donald E. Weder) Group No.: 3643
Serial No.: 10/701,239) Examiner: J. Gellner
Filed: November 4, 2003) Atty. Dkt. No.: 8403.343
For: EXPANDABLE CONTAINER FOR FLORAL GROUPING

Mail Stop - Fee Amendment
Commissioner for Patents
Post Office Box 1450
Alexandria, Virginia 22313-1450

**NOTIFICATION OF FILING OF CONTINUING
OR DIVISIONAL APPLICATION**

Notification is hereby being made of the filing of a:

- ☐ continuation
- ☐ continuation-in-part
- ☒ divisional application for this case (8404.211)
- ☐ concurrently herewith
- ☒ on March 10, 2005.

Respectfully submitted,

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PTO/SB/21 (09-04)

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**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

Application Number
10/701,239Filing Date
11/04/2003First Named Inventor
Donald E. WederArt Unit
3643Examiner Name
J. GellnerAttorney Docket Number
8403.343**ENCLOSURES (Check all that apply)**

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation of POA, Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
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<input type="checkbox"/> Reply to Missing Parts/Incomplete Application	1. Transmittal Form (1 page);	
<input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	2. Fee Determination Record (1 page);	
	3. Credit Card Payment Form (1 page);	
	4. Amendment (6 pages);	
	5. Petition for Extension of Time (1 page); and	
	6. Postcard.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	DUNLAP, CODDING & ROGERS, P.C.		
Signature			
Printed name	Kathryn L. Hester, Ph.D.		
Date	3-8-05	Reg. No.	46,768

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: *** SENT BY EXPRESS MAIL, DATED 03/08/2005; EV 373445468 US***

Signature			
Typed or printed name	Kathryn L. Hester, Ph.D.	Date	3-8-05

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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